

# UPPER GWYNEDD TOWNSHIP

## Application for Subdivision and Land Development Approval

\_\_\_\_\_ **Subdivision Plan Approval**

\_\_\_\_\_ **Land Development Approval**

The Undersigned hereby applies for Review of a Plan submitted herewith and described below:

1. Sketch \_\_\_\_\_ Preliminary \_\_\_\_\_ Final \_\_\_\_\_ Re- subdivision \_\_\_\_\_
2. Submission Date of Application and Plans \_\_\_\_\_
3. Name of Subdivision \_\_\_\_\_  
Location \_\_\_\_\_  
County Deed Book # \_\_\_\_\_ Page # \_\_\_\_\_  
Zoning District \_\_\_\_\_ County Tax Map Block # \_\_\_\_\_  
Unit # \_\_\_\_\_ Lot # \_\_\_\_\_ Total Acreage \_\_\_\_\_
4. Name of Property Owner (s) \_\_\_\_\_  
(If a Corporation, list Corporation=s Name, Address and Two Officers  
\_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_
5. Name of Applicant (if other than owner) \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_
6. Applicant=s Interest (if other than owner)  
\_\_\_\_\_  
\_\_\_\_\_

7. Engineer, Surveyor or Planner responsible for the preparation of the Plan

\_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

8. Type of Development, Use, or Building Planned # of Units

\_\_\_\_\_ Single-Family Detached \_\_\_\_\_

\_\_\_\_\_ Single-Family Attached (Townhouses) \_\_\_\_\_

\_\_\_\_\_ Single-Family Semi-Detached (Twin) \_\_\_\_\_

\_\_\_\_\_ Multi-Family (Apartment, Duplex, Quad) \_\_\_\_\_

\_\_\_\_\_ Planned Residential Development \_\_\_\_\_

\_\_\_\_\_ Commercial

\_\_\_\_\_ Industrial

\_\_\_\_\_ Land Development

\_\_\_\_\_ Subdivision of Land Only

If Commercial, Industrial, or Land Development, or if the Application is for Use and Occupancy Approval or Building Approval, please describe briefly \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. List additional material submitted with this Application \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

INDEFINITE EXTENSION FORM

DATE:

Upper Gwynedd Township  
One Parkside Place  
North Wales, PA 19454

ATTN: Leonard Perrone  
Township Manager/Secretary

E. Van Rieker  
Planning Coordinator and Zoning Officer

RE: Development Name:

\_\_\_\_\_ Th  
e 90-day review period for the aforementioned development expires on \_\_\_\_\_. In accordance with the Pennsylvania Municipalities Planning Code Article V, Section 508(3), I hereby request an indefinite period of time from the current expiration date to revise and submit amended plans.

After the expiration date, a 30-day review period may be started and this Indefinite Extension revoked by request of the applicant or the Board of Commissioners at anytime. This 30-day review period will begin the first day after receipt by the Township of a written request from the applicant or receipt by the applicant of notification by the Board of Commissioners.

\_\_\_\_\_  
Applicant's Name – PRINT

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Applicant's Authorized Representative